



Incident Report

Print Date/Time: 08/08/2016 09:37
Login ID: ss0143

Lake Stevens Police Department
ORI Number: WA0311900

Incident: 2016-00015374

Incident Date/Time: 8/5/2016 4:36:00 PM
Location: SR 9 NE / SR 92
MARYSVILLE WA 98270
Phone Number: (425) 530-5749
Report Required: Yes
Prior Hazards: No
LE Case Number:

Incident Type: Collision
Venue: Lake Stevens
Source: 911
Priority: 3
Status: 3
Nature of Call:

Unit/Personnel

Unit	Personnel
19D2	SS0132-Kilroy

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
2	Reporting Party	HALL, SYDNEY JAMES	111 W GILMAN AVE Arlington WA 982231024	(425) 530-5749		Male	01/25/1951
1	Driver	JENSEN, MARY JEAN	308 SE MOUNTAIN VIEW DR College Place WA 993241732	(509) 540-1064		Female	11/13/1947
2	Driver	HALL, SYDNEY JAMES	111 W GILMAN AVE Arlington WA 982231024	(425) 530-5749		Male	01/25/1951
3	Driver	BRADLEY, CARRIE LYNN	8419 79TH ST Marysville WA 982707402	(425) 931-6376		Unknown	02/06/1983

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
Involved Vehicle						ANZ9687	
Involved Vehicle						ARU0400	
Involved Vehicle						AXW3099	

Disposition(s)

Disposition	Count
R	1

Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
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CAD Narrative

08/05/2016 : 16:40:02 SP0419 Narrative: JUST PAST SOPER HILL

08/05/2016 : 16:38:30 SP0224 Narrative: Narrative added from associated Call #: 491 - ON SR 9 AT SOPER HILL

08/05/2016 : 16:38:04 SP0419 Narrative: AA

**08/05/2016 : 16:37:46 SP0224 Narrative: Narrative added from associated Call #: 491 - CC, NONINJ, NONBLKING, RP IN WHI
SUBURBAN VS BLU KIA SOL VS TAN PC**

08/05/2016 : 16:37:45 sp0251 Narrative: LR251

08/05/2016 : 16:37:41 sp0251 Narrative: RP IN A KIA SOL DRK GRY

08/05/2016 : 16:37:10 sp0251 Narrative: 3 VEHS, NON BLKING, NON INJ

COLLISION REPORT

STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT

1591971

REPORT NO. **E570710**CASE # **2016-15374**LOCAL AGENCY
CODINGTOTAL # OF
UNITS **03** OBJECT
STRUCKTRIBAL
RESERVATIONDATE OF COLLISION **08** - **05** - **2016** TIME (2400) **1636** COUNTY # **31** MILES **N** **E** **IN** **OF** **0664**ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ NON-INTERSECTION ☒
SR 9 NE BLOCK NO. ☒ **2400**
MILE POSTDISTANCE **10** **00** MILES ☒ **N** ☒ **E** ☒ **S** ☒ **W** OF (REFERENCE OR CROSS STREET) **SOPER HILL**UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET ☒ YES ☐ NO ☐ PHONE **D: 5095401064**LAST NAME **JENSEN** FIRST NAME **MARY** MIDDLE INITIAL **J**STREET NEW ADDRESS **308 SE MOUNTAIN VIEW DR**CITY **COLLEGE PLACE** ST **WA** ZIP **993241732**CDL RESTRICTIONS **B** ENDORSEMENTSDRIVER'S LICENSE # **JENSEMJ536QL** STATE **WA** SEX **F** D.O.B. **11** - **13** - **1947**ON DUTY ☐ STATUS AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE INJURY CLASS **1** NATURE OF INJURIESLICENSE PLATE # **ANZ9687** STATE **WA** VIN# **1G4HP52KX5U221904**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2005** MAKE **BUIC** MODEL **LES4D** STYLE **4D** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒REGISTERED OWNER INFO. **FLOYD JENSEN 308 SE MOUNTAIN VIEW DR COLLEGE PLACE WA 99324**LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO. & POLICY # **EAGLE WEST 25-PAC-2-1848845**VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGEUNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET ☒ YES ☐ NO ☐ PHONE **D: 4255305749**LAST NAME **HALL** FIRST NAME **SYDNEY** MIDDLE INITIAL **J**STREET NEW ADDRESS **111 W GILMAN AVE**CITY **ARLINGTON** ST **WA** ZIP **982231024**CDL RESTRICTIONS **B** ENDORSEMENTSDRIVER'S LICENSE # **HALL*SJ498B5** STATE **WA** SEX **M** D.O.B. **01** - **25** - **1951**ON DUTY ☐ STATUS AIRBAG **2** RESTR. **4** EJECT **1** HELMET USE INJURY CLASS **1** NATURE OF INJURIESLICENSE PLATE # **ARU0400** STATE **WA** VIN# **KNDJP3A50E7098084**

TRAILER PLATE # STATE TRAILER PLATE # STATE

VEH. YEAR **2014** MAKE **KIA** MODEL **SOUL** STYLE **UT** VEHICLE TOWED YES ☐ NO ☒ TOWED BY GOVT. VEHICLE YES ☐ NO ☒REGISTERED OWNER INFO. **SYDNEY HALL 111 W GILMAN AVE ARLINGTON WA 98223**LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO. & POLICY # **COUNTRY FINANCIAL P46A4921832**VEHICLE LEGALLY STANDING YES ☐ NO ☐ CITATION # CHARGEOFFICER'S NAME (PRINT) **J. KILROY #0132** BADGE OR ID # **#0132** AGENCY **WA0311900**


**STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT**


1591972

CORRECTION

REPORT NO. **E570710**CASE # **2016-15374**
ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #										SEX	D.O.B. MMDDYYYY	-		-				
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

Unit 1 was traveling north on SR 9 NE passing the intersection with Soper Hill Rd. Unit 2 was traveling north on SR 9 NE passing the intersection with Soper Hill Rd and slowing down. Unit 3 was traveling north on SR 9 NE passing the intersection with Soper Hill Rd and slowing down. Driver of unit 1 said she did not notice the units in front of her were stopping. Unit 1 struck unit 2 pushing unit 2 into unit 3.

All units were driven from the scene and there were no injuries.

Unit 1 was at fault due to inattention.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

J. KILROY #0132
08-05-16 05:33 PM

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

W. AUKERMAN 0072

DATE

8/5/2016 5:39:03 PM

BADGE OR ID #

#0132

ORI #

WA0311900

TIME POLICE DISPATCHED

4:38 PM

TIME POLICE ARRIVED

4:39 PM


**SUPPLEMENTAL
POLICE TRAFFIC
COLLISION REPORT**


013197

REPORT NO. **E570710**CASE # **2016-15374****COMMERCIAL MOTOR CARRIER**INTERSTATE ☐ INTRASTATE ☐

UNIT #

USDOT

IOC #

VEHICLE TYPE

CARGO BODY TYPE

CARRIER NAME

CARRIER ADDRESS

CITY

ST

ZIP

NAME SOURCE

AXLES

GVWR

PLACARD

+

NAME IF NO NUMBER

ADDITIONAL UNITS

UNIT #

3

MOTOR VEHICLE

☒

PEDAL-CYCLE

☐

PEDESTRIAN

☐

PROPERTY OWNER

☐

DAMAGE THRESHOLD MET

YES

☒

NO

☐

PHONE

D: 4259316376

LAST NAME

BRADLEY

FIRST NAME

CARRIE

MIDDLE INITIAL

L

STREET NEW ADDRESS

8419 79TH ST NE

CITY

MARYSVILLE

ST

WA

ZIP

982707402

CDL

RESTRICTIONS

B

ENDORSEMENTS

DRIVER'S LICENSE #

BRADLCL172CF

STATE

WA

SEX

F

D.O.B. MMDDYYYY

02

-

06

-

1983

ON DUTY

☐

STATUS

AIRBAG

2

RESTR.

4

EJECT

1

HELMET USE

INJURY CLASS

1

NATURE OF INJURIES

LICENSE PLATE #

AXW3099

STATE

WA

VIN#

1GNSKHKC3GR205043

TRAILER PLATE #

STATE

TRAILER PLATE #

STATE

VEH. YEAR

2016

MAKE

CHEV

MODEL

SUBURB

STYLE

UT

VEHICLE TOWED

YES

NO

☒

TOWED BY

GOVT. VEHICLE

YES

NO

☒

REGISTERED OWNER INFO. CARRIE BRADLEY 8419 79TH ST NE MARYSVILLE WA 982707402 D: 4259316376

SHADE IN DAMAGED AREA

LIABILITY INSURANCE IN EFFECT

☒

INSURANCE CO & POLICY # TRAVELERS INSURANCE 988486950 101 1

VEHICLE LEGALLY STANDING

YES

NO

☐

CITATION #

CHARGE



UNIT #

MOTOR VEHICLE

☐

PEDAL-CYCLE

☐

PEDESTRIAN

☐

PROPERTY OWNER

☐

DAMAGE THRESHOLD MET

YES

NO

☐

PHONE

LAST NAME

FIRST NAME

MIDDLE INITIAL

STREET NEW ADDRESS

CITY

ST

ZIP

CDL

RESTRICTIONS

ENDORSEMENTS

DRIVER'S LICENSE #

STATE

SEX

D.O.B. MMDDYYYY

ON DUTY

☐

STATUS

AIRBAG

RESTR.

EJECT

HELMET USE

INJURY CLASS

NATURE OF INJURIES

LICENSE PLATE #

STATE

VIN#

TRAILER PLATE #

STATE

TRAILER PLATE #

STATE

VEH. YEAR

MAKE

MODEL

STYLE

VEHICLE TOWED

YES

NO

☐

TOWED BY

GOVT. VEHICLE

YES

NO

☐

REGISTERED OWNER INFO.

SHADE IN DAMAGED AREA

LIABILITY INSURANCE IN EFFECT

☐

INSURANCE CO & POLICY #

VEHICLE LEGALLY STANDING

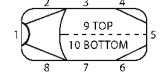
YES

NO

☐

CITATION #

CHARGE



I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

J. KILROY #0132

08-05-16 05:33 PM

INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST DET

DATED:

PLACE SIGNED

BADGE OR ID #

#0132

ORI #

WA0311900

APPROVED BY

AUKERMAN

DATE

8/5/2016

PAGE

3

OF

4

REPORT NO. E570710

CASE # 2016-15374

DATE AND TIME
OF COLLISION 08/05/16 16:36



Not To Scale

